



AMGEN[®]

2024 Benefits Decision Guide

Annual Enrollment for your 2024 Amgen benefits is Oct. 26 – Nov. 10, 2023.

Table of Contents

What to Expect	2	FLEXIBLE SPENDING ACCOUNTS	13
Benefits	4	HEALTH SAVINGS ACCOUNT.	14
MEDICAL	4	VOLUNTARY BENEFITS	16
Medical Plan Options.	4	Enrollment Checklist	17
PPO Medical Plans.	5	Wellness	18
Medical Premiums	7	Legal Notices	19
DENTAL	9	Contacts	20
Amgen Dental Plan.	9		
Dental Premiums.	10		
VISION.	11		
VSP Vision Care	11		
Vision Premiums	12		

What to Expect

Annual benefits enrollment is your opportunity to review and update your benefits for 2024.

You do not need to actively enroll if you would like to keep your current Amgen medical, dental and vision coverage (or continue to opt-out of coverage) and do not want to add or change eligible dependent coverage.

There are a few exceptions, such as Health Savings Account (HSA) and Flexible Spending Account (FSA) elections, which require you to enroll annually if you wish to participate in 2024.

Once Annual Enrollment closes, you may not change your elections until next year's Annual Enrollment, unless you experience a qualifying life event (e.g., if you get married or have a child).

If you add new dependents to your coverage during Annual Enrollment, or any time during the year because of a qualifying event, you are required to submit documentation (i.e., birth certificate, marriage license) to support eligibility before they are enrolled in coverage.

What's New for 2024

- **Healthcare premiums:** The medical plans incurred significant increases due to the rate of inflation impacting the general cost of healthcare, as well as increased utilization by our population coming out of the pandemic. These factors resulted in premium increases of around 10% for our Anthem plans. See [Medical Premiums](#).
- **Medical plan deductibles:** The annual plan deductibles for the Anthem Traditional PPO and Value PPO will increase. This change is the first increase in nine years and brings our plans more in line with our peer medical offerings. See [PPO Medical Plans](#).
- **Medical out-of-pocket maximums:** The annual out-of-pocket maximums for the Anthem Traditional PPO and Value PPO will change for the first time in nine years across all salary bands. See [PPO Medical Plans](#).
- **Express Scripts prescription drug updates:** For those enrolled in Anthem plans and receiving medications through Express Scripts, Prior Authorization is now required for Nurtec, Glucagon-like peptide-1 receptor agonists (GLP-1) and chronic dry eye medications. Also, the program is introducing step therapy requirements for Triptan migraine agents.
- **Diabetes products now covered:** Express Scripts will add diabetes product coverage, including coverage for disposable insulin pumps.
- **Kaiser HMO Northern California:** Significant increases in healthcare cost requires the introduction of an annual \$500 deductible (staff member only coverage) or \$1,000 deductible (family coverage) and will change how certain services will be covered. For example, the annual deductible may have to be met before the plan covers certain

Amgen offers tools and resources to help you better understand your options. You can access these resources via [MyHR > Benefits > Manage Health and Insurance Benefits](#).

services. Additionally, annual out-of-pocket maximums will increase to \$3,000 (staff member only coverage) or \$6,000 (family coverage).

- **UnitedHealthcare HMO California:** The lab and x-ray copay will increase to \$25.
- **Increase in the Healthcare FSA contribution limits:** The Healthcare FSA annual contribution limit is \$3,050. See [Flexible Spending Accounts](#).
- **Increases in Health Savings Account contribution limits:** The IRS announced increased maximum annual HSA contributions for 2024. See [Health Savings Account](#).

As part of our continuous effort to evolve our health and welfare plans, while improving support to the broadest range of staff, we are modifying the benefits available under the following plans:

- **Lyra Health updates:** The annual limit on outpatient therapy visits in our enhanced behavioral health program will move to 15 sessions (up to six of which may be stress management coaching).
- **Juneteenth Holiday:** June 19th, or Juneteenth, marks the oldest-known celebration commemorating the end of slavery in the United States. In alignment with our commitment to diversity, inclusion and belonging (DI&B), Amgen will observe this historic occasion moving forward.
- **Paid parental leave:** Our paid parental leave policy, for births/adoptions on or after January 1, 2024, will provide an increase in time away to bond with a new child to 10 weeks.

Staff Members on a Leave of Absence

You do not need to actively enroll if you would like to keep your current Amgen medical, dental and vision coverage (or continue to opt-out of coverage) and do not want to add or change eligible dependent coverage. **If currently on a leave of absence, you may make changes to your benefit elections, including your HSA and FSA, when you return from a leave of absence. Changes must be made within 31 days of the event.**

MEDICAL

Medical Plan Options

Amgen offers two **PPO Medical Plan** options. The Value PPO Medical Plan includes a Health Savings Account. Staff members in select locations may choose from a local HMO or EPO plan.

Medical Surcharges

Staff members in certain situations are asked to help share the cost of coverage.

- **Tobacco surcharge:** \$150 per month if a staff member uses tobacco. Tobacco cessation resources are available on MyAmgen Wellness and the **Amgen Benefits Center**.
- **Working spouse/domestic partner surcharge:** \$100 per month if a staff member's working spouse/domestic partner declines coverage available through his or her own employer and joins Amgen medical coverage. The surcharge is applicable even for staff members choosing Amgen coverage as secondary coverage for their spouse/domestic partner.

If either or both surcharges apply to you in the current year and you do not want to make changes to your medical election for the new year, your current surcharge(s) will roll over to 2024. If there has been a change (e.g., you quit smoking or your spouse stopped working), you can make this update during Annual Enrollment. Retroactive refunds will not be provided, so make your elections carefully.

Related Links

- [Anthem](#)
- [Find Doctors](#)
- [Medical Premiums](#)

Start with Anthem Health Guides for support with remembering exams and tests, comparing costs, finding providers and questions about claims. Log on to the **Anthem website** and select the Customer Support tab or call **844-647-3687**. For assistance with a complex issue, contact our Anthem Concierge, **Victor Evangelista** at **951-316-1301**.

New Anthem ID Cards

Anthem will mail new medical ID cards in December to reflect a change in phone numbers for the 24/7 NurseLine and Behavioral Health Resource Center.

MEDICAL

PPO Medical Plans

Amgen offers two PPO healthcare coverage options: the Traditional PPO and the Value PPO with a [Health Savings Account](#). Both plans cover the same wide range of healthcare services, use Anthem's nationwide network of providers and provide access to Amgen therapies.

Related Links

- [Anthem](#)
- [Find Doctors](#)
- [Express Scripts](#)
- [Medical Premiums](#)

IBM MyBenefits Mentor

The IBM MyBenefits Mentor, now with IBM Watson, is a powerful comparison tool that provides information to help you make data-driven decisions about your enrollment. This tool is available on the [Amgen Benefits Center](#).

Traditional PPO vs. Value PPO Plans

	Traditional PPO		Value PPO	
Deductibles ¹				
Coverage	In-Network	Out-of-Network	In-Network	Out-of-Network
Staff member only	\$500	\$850	\$1,600	\$3,200
Family	\$1,000	\$1,700	\$3,200	\$6,400
Are prescription drugs included in the deductible?	No	No	Yes	Yes

Medical and Prescription Drug Out-of-Pocket Maximums				
Annual Base Pay	In-Network	Out-of-Network	In-Network	Out-of-Network
Less than \$100,000	\$3,500/staff member only \$7,000/family	\$8,000/staff member only \$16,000/family	\$3,500/staff member only \$7,000/family	\$8,000/staff member only \$16,000/family
\$100,000–\$199,999	\$4,500/staff member only \$7,850/family	\$10,500/staff member only \$21,000/family	\$4,500/staff member only \$7,850/family	\$10,500/staff member only \$21,000/family
\$200,000+	\$5,500/staff member only \$7,850/family	\$13,000/staff member only \$26,000/family	\$5,500/staff member only \$7,850/family	\$13,000/staff member only \$26,000/family

MEDICAL

PPO Medical Plans (Cont.)

Medical Coinsurance	Traditional PPO		Value PPO	
	In-Network	Out-of-Network ²	In-Network	Out-of-Network ²
Amgen's share for most covered services	80%	50% after deductible	80%	50% after deductible
Preventive	100% deductible waived	50% after deductible	100% deductible waived	50% after deductible
Primary care (including OB/GYN visit ³ or LiveHealth Online)	100% after deductible	50% after deductible	100% after deductible	50% after deductible
Specialist visit	80% after deductible	50% after deductible	80% after deductible	50% after deductible
Inpatient hospital stay	80% after deductible	50% after deductible	80% after deductible	50% after deductible
Outpatient surgery	80% after deductible	50% after deductible	80% after deductible	50% after deductible
Emergency room visit	80% after deductible	50% after deductible	80% after deductible	50% after deductible

Prescription Drug Copays ^{5,6}	In-Network	Out-of-Network	In-Network	Out-of-Network
Preventive	100% covered, deductible waived	100% covered, deductible waived	100% covered, deductible waived	100% covered, deductible waived
Amgen products ⁴	100% covered, deductible waived	100% covered, deductible waived	100% covered, after deductible	100% covered, after deductible
Retail (up to 30-day supply)	You pay \$10 (generic); \$30 (preferred/brand formulary); \$50 (brand non-formulary) deductible waived	50% covered, after deductible	You pay \$10 (generic); \$30 (preferred/brand formulary); \$50 (brand non-formulary)	50% covered, after deductible
Mail-order (up to 90-day supply) deductible waived	You pay \$25 (generic); \$75 (preferred/brand formulary); \$125 (brand non-formulary) deductible waived	Not covered	You pay \$25 (generic); \$75 (preferred/brand formulary); \$125 (brand non-formulary) after deductible	Not covered

- Only in-network eligible expenses apply toward your in-network deductible and in-network out-of-pocket maximum. Some expenses do not apply to your in-network deductible or in-network out-of-pocket maximum. Only out-of-network eligible expenses apply toward your out-of-network deductible and out-of-network out-of-pocket maximum. For more information, visit MyHR and download the Summary Plan Description (SPD).
- For professional and outpatient facility charges, out-of-network benefits are reduced to one-half of 150% of the Medicare Prevailing Rate. In addition to satisfying a higher deductible, paying a higher coinsurance rate, and being subject to higher out-of-pocket maximums, out-of-network benefits reimbursements are based on usual and prevailing rates as determined by the respective insurer/Administrator, and you may be balance-billed for the difference.
- Eligible in-network preventive care, including well-woman care, is covered at 100% before the deductible.
- Electing an Anthem medical plan will ensure coverage for Amgen products. Amgen products are covered at 100% (deductible waived) under the Traditional PPO, and 100% after deductible under the Value PPO.
- Excluded: Compound medication ingredients that have not shown clinical benefit over lower-cost alternatives, have components that are not FDA approved, or have bulk ingredients used in compound medications where a standard equivalent exists.
- Formulary and dispensing rules are subject to change.

MEDICAL

Medical Premiums

Medical premiums are determined by your annual base pay as of **November 15, 2023**, as well as the coverage level you choose. There will be modest premium increases to reflect the general increase in healthcare cost experienced by the plans. The following are biweekly medical premiums for 2024.

	Anthem		UnitedHealthcare HMO California	Anthem EPO New England	Kaiser HMO N. California
	Traditional PPO	Value PPO			
Staff member					
Salary less than \$100,000	\$48.92 / \$53.53 / \$58.15	\$29.08 / \$33.69 / \$38.31	\$37.39 / \$42.00 / \$46.62	\$46.62 / \$51.23 / \$55.85	\$50.31 / \$54.92 / \$59.54
\$100,000 – \$199,999	\$56.31 / \$60.92 / \$65.54	\$34.15 / \$38.76 / \$43.38	\$43.39 / \$48.00 / \$52.62	\$54.92 / \$59.53 / \$64.15	\$57.69 / \$62.30 / \$66.92
\$200,000+	\$61.85 / \$66.46 / \$71.08	\$37.85 / \$42.46 / \$47.08	\$46.62 / \$51.23 / \$55.85	\$58.62 / \$63.23 / \$67.85	\$62.77 / \$67.38 / \$72.00

Staff member + spouse/domestic partner					
Salary less than \$100,000	\$152.31 / \$156.92 / \$161.54	\$105.23 / \$109.84 / \$114.46	\$126.46 / \$131.07 / \$135.69	\$149.08 / \$153.69 / \$158.31	\$163.39 / \$168.00 / \$172.62
\$100,000 – \$199,999	\$172.62 / \$177.23 / \$181.85	\$119.08 / \$123.69 / \$128.31	\$144.00 / \$148.61 / \$153.23	\$168.00 / \$172.61 / \$177.23	\$184.15 / \$188.76 / \$193.38
\$200,000+	\$186.00 / \$190.61 / \$195.23	\$129.23 / \$133.84 / \$138.46	\$154.62 / \$159.23 / \$163.85	\$180.00 / \$184.61 / \$189.23	\$198.00 / \$202.61 / \$207.23

Staff member + child(ren)					
Salary less than \$100,000	\$87.23 / \$91.84 / \$96.46	\$57.69 / \$62.30 / \$66.92	\$81.23 / \$85.84 / \$90.46	\$85.39 / \$90.00 / \$94.62	\$105.69 / \$110.30 / \$114.92
\$100,000 – \$199,999	\$100.15 / \$104.76 / \$109.38	\$65.54 / \$70.15 / \$74.77	\$93.23 / \$97.84 / \$102.46	\$97.39 / \$102.00 / \$106.62	\$120.46 / \$125.07 / \$129.69
\$200,000+	\$107.54 / \$112.15 / \$116.77	\$71.54 / \$76.15 / \$80.77	\$100.15 / \$104.76 / \$109.38	\$104.77 / \$109.38 / \$114.00	\$129.69 / \$134.30 / \$138.92

MEDICAL

Medical Premiums (Cont.)

	Anthem		UnitedHealthcare HMO California	Anthem EPO New England	Kaiser HMO N. California
	Traditional PPO	Value PPO			
Staff member + family					
Salary less than \$100,000	\$210.00 / \$214.61 / \$219.23	\$129.69 / \$134.30 / \$138.92	\$163.85 / \$168.46 / \$173.08	\$204.92 / \$209.53 / \$214.15	\$207.69 / \$212.30 / \$216.92
\$100,000 – \$199,999	\$237.69 / \$242.30 / \$246.92	\$146.77 / \$151.38 / \$156.00	\$186.92 / \$191.53 / \$196.15	\$231.69 / \$236.30 / \$240.92	\$232.62 / \$237.23 / \$241.85
\$200,000+	\$256.15 / \$260.76 / \$265.38	\$159.23 / \$163.84 / \$168.46	\$200.31 / \$204.92 / \$209.54	\$248.31 / \$252.92 / \$257.54	\$249.69 / \$254.30 / \$258.92

Reach **Gold Status** / **Silver Status** / **No Wellness Discount**. For more information Wellness Credit Incentives, go to **Wellness**.

DENTAL

Amgen Dental Plan

The Amgen Dental Plan, administered by Delta Dental of California, covers preventive and diagnostic care at 100%. Other covered services—including orthodontia—are subject to a calendar-year deductible, coinsurance and coverage maximums.

Benefits are provided up to a maximum of \$2,000 per person per calendar year (a separate lifetime maximum of \$2,000 per person applies for orthodontia). While you can see any dentist, your out-of-pocket costs are lower when you visit a network provider. PPO and Premier dentists are in-network, but you will receive the best rate when using the PPO network.

For details, review the [Delta Dental Benefits Summary](#).

Related Links

- [Delta Dental](#)
- [Find Dentist](#)
- [Dental Premiums](#)

For more information about the Amgen Dental Plan, go to the **Amgen Benefits Center** or *MyAmgen > MyHR > Benefits > Manage Health and Insurance Benefits* for dental plan highlights and Summary Plan Description.

In-Network Dental Plan Details	Benefits
Deductible per calendar year	\$50 per person / \$150 per family
Preventive — routine oral exam	Plan pays 100%, after deductible
All other regular dental expenses	Plan pays 80%, after deductible
Special dental expenses	Plan pays 50%, after deductible
Orthodontia expenses	Plan pays 50%, after deductible

DENTAL

Dental Premiums

Dental premiums are determined by the coverage level you choose. The following are biweekly dental premiums for full-time staff members for 2024.

Coverage Level	Biweekly Contribution Rates
Staff member	\$6.58
Staff member + spouse/domestic partner	\$13.82
Staff member + child(ren)	\$11.39
Staff member + family	\$20.40

VISION

VSP Vision Care

Amgen provides vision coverage through VSP Vision Care, which offers access to a broad network of providers. While you can see any doctor, you'll get the most out of your benefits and greater savings when you visit a doctor in the VSP Choice provider network. The plan provides coverage for annual exams and contact lenses or glasses, including a number of designer frames (covered every 24 months).

If you elect coverage with VSP, visit the [VSP website](#) to download an ID card (your Social Security number is required to register). For details, review the [VSP Benefit Summary](#).

Related Links

- [VSP](#)
- [Find Doctors](#)
- [Vision Premiums](#)

For more information about VSP Vision Care, go to the **Amgen Benefits Center** or *MyAmgen > MyHR > Benefits > Manage Health and Insurance Benefits* for vision plan highlights and Summary Plan Description.

In-Network VSP Vision Care Details	Benefits
WellVision exam	<p><i>Every calendar year:</i></p> <p>\$20 copay for exam and glasses</p>
Prescription glasses	<p><i>Frames every other calendar year; combined with exam:</i></p> <ul style="list-style-type: none"> • \$200 allowance for frames • \$220 allowance for featured frame brands • 20% savings on the amount over your allowance • \$110 Costco frame allowance <p><i>Lenses every calendar year; combined with exam</i></p> <p>You pay extra for progressive lenses and other enhancements</p>
Contacts (instead of glasses)	<p><i>Every calendar year:</i></p> <p>Up to \$60 copay; \$150 allowance for contacts (copay does not apply); contact lens exam (fitting and evaluation)</p>
Diabetic Eyecare Plus Program	<p><i>As needed:</i></p> <ul style="list-style-type: none"> • \$20 copay for services related to diabetic eye disease, glaucoma and age-related macular degeneration (AMD). • Retinal screening for eligible members with diabetes. <p>Limitations and coordination with medical coverage may apply</p> <p>Ask your VSP doctor for details.</p>

VISION

Vision Premiums

Vision premiums are determined by the coverage level you choose. The following 2024 biweekly vision premiums apply to both full and part-time staff members.

Coverage Level	Biweekly Contribution Rates
Staff member	\$3.61
Staff member + spouse/domestic partner	\$6.62
Staff member + child(ren)	\$7.22
Staff member + family	\$12.03

Flexible Spending Accounts

With Amgen's flexible spending accounts (FSAs), you can reduce your taxable income and use those pre-tax dollars towards eligible health and/or dependent care expenses. For a list of expenses eligible for reimbursement, review Internal Revenue Service (IRS) [Publication 502](#) and/or [503](#).

For more information about FSAs, go to the [Amgen Benefits Center](#) or [MyAmgen > MyHR > Benefits > Manage Health and Insurance Benefits](#) to calculate savings accounts, review plan highlights and Summary Plan Descriptions.

	Examples of Eligible Expenses	Annual Contribution Limit
Healthcare FSA	<ul style="list-style-type: none"> Medical or dental plan deductibles, coinsurance and copayments The Healthcare FSA offers a rollover of up to \$550 	\$3,050
Dependent care FSA	<p>Those that allow:</p> <ul style="list-style-type: none"> You and/or your spouse to work Your spouse to attend school full time for at least five months a year 	\$5,000

Limited Purpose FSA (LPFSA)

If you enroll in the Value PPO medical plan, you may enroll in the LPFSA in addition to an HSA. A LPFSA reimburses you for qualified dental and vision expenses. The LPFSA reimburses you for qualified medical and prescription expenses only after the medical plan deductible has been met for the year. LPFSA dollars (with the exception of the \$550 or less carryover) will be forfeited at the end of the year if not used. Please review your options carefully before enrolling in a LPFSA.

Health Savings Account

With a Health Savings Account or HSA, you choose how to spend your healthcare dollars. For those who elect to enroll in the higher deductible Value PPO, an HSA offers the opportunity to pay for eligible medical, dental and vision expenses with pre-tax funds for you, your spouse/ domestic partner and dependents. In addition, any unused annual contributions continue to grow, and all HSA funds are yours to keep, even after you leave Amgen. Enroll in the HSA if you elect the Value PPO Plan and meet [IRS eligibility guidelines](#).

HSA contribution limits for 2024 are \$4,150 (staff member only coverage) or \$8,300 (family coverage). If you are age 55 or older, you can make an additional \$1,000 catch-up contribution any time in the plan year.

You may change your current HSA contributions at any time throughout the year, without a qualified life event, by visiting the [Amgen Benefits Center](#).

Use HSA funds now or in the future for:

- Health plan deductibles and coinsurance
- Qualified medical, pharmacy, dental and vision care services for you, your spouse or dependents
- Medicare premiums at retirement

1

Save for eligible healthcare expenses

Make regular pre-tax contributions directly from your paycheck, up to IRS limits.

2

Save on taxes

Contributions are federal and state tax-free* and withdrawals, including investment gains used to pay for eligible expenses, are not taxed.

3

Save if you are age 55+

Contribute an additional \$1,000 per year in catch-up contributions if you are age 55 and older at any time in the plan year.

* In some states, including California, your contributions are subject to state tax.

If You Elect a Different Plan in 2024

If you leave the Value PPO and are not covered by another high-deductible medical plan (such as through your spouse or domestic partner's employer), IRS guidelines state that:

- Your HSA will remain open (unless you take steps to close it), and all funds are yours to keep.

Health Savings Account (Cont.)

- You can spend all existing funds in your HSA – without taxes or penalties – to pay for future, qualified healthcare expenses.
- You will not be able to make new contributions into your HSA.
- As long as you are employed with Amgen, the company will pay the monthly administrative fee so there is no cost to you to keep your account open.
- If you enroll in a high-deductible plan in the future, you can make new contributions to your existing HSA account.

Voluntary Benefits

Legal Plan

Amgen offers legal coverage through MetLife Legal Plans. It provides simple, affordable and accessible assistance through a network of experienced attorneys to help when you are buying a home, planning for your family's future, caring for aging parents and other key times in your life. Take advantage of:

- An experienced service team to match you with the right attorney
- Experienced legal advice and representation, in person or by phone
- In-court representation for covered legal matters
- A mobile app and online tools for your convenience
- No copays, deductibles, or claim forms with network attorneys

The cost is \$22.25 per month. Elect this optional coverage during Annual Enrollment.

Pet Insurance

Take advantage of discounted pet insurance through MetLife to help protect your furry family members. Coverage includes accidental injuries, illnesses, exam fees, surgeries, medications and more. Once enrolled, submit claims through a variety of convenient methods to receive reimbursement for covered expenses.

Related Links

- [MetLife Legal Plan](#)
- [MetLife Pet Insurance](#)

Enrollment Checklist

Review your Annual Enrollment action checklist:

- Reference [Legal Notices](#) for your 2024 Summary of Benefits documents.
- Use online support tools and resources available on the Amgen Benefits Center to help you make enrollment decisions. When accessing the [Amgen Benefits Center](#), you are required to re-authenticate devices every six months or after 50 logins, whichever comes first.
- Make elections during Annual Enrollment: **October 26 – November 10**.
- Make your [Healthcare](#) and [Dependent Care Flexible Spending Account \(FSA\)](#) elections for 2024.
- Open a [Health Savings Account](#) if enrolling in the Value PPO for the first time, or if re-enrolling with an existing HSA; determine your HSA contribution elections for 2024.
- Confirm or modify your beneficiaries online.
- Review your confirmation statement, which will be mailed to your address of record at the end of Annual Enrollment and can be expected by the end of November.
- Complete wellness activities to earn credit towards the 2024 premium discount. All activities must be completed and recorded by Vitality by **November 30, 2023** to qualify.

Amgen offers tools and resources to help you better understand your options. You can access these resources via [MyHR > Benefits > Manage Health and Insurance Benefits](#).

Wellness

Amgen offers wellness incentive and support programs to help supplement your 2024 healthcare premiums. You have until **November 30** to complete wellness activities in **Vitality** to earn a 2024 healthcare premium discount. Vitality is available to all benefits-eligible staff, even if you're not enrolled in an Amgen medical plan.

Vitality Health Enhancement Program

You and your spouse/domestic partner, if applicable, may choose to participate in Vitality. You will receive a personalized program that can help you incorporate healthy activities into your life. Tracking these activities helps you progress through Vitality's status levels. If you reach Silver or Gold status, you will be eligible for discounts on your healthcare plan premiums in 2025.

	Silver	Gold
Staff member	Earn 2,500 Vitality Points	Earn 6,000 Vitality Points
Spouse/domestic partner	Earn 1,000 Vitality Points	Earn 3,000 Vitality Points

Hello Heart

Hello Heart helps you track, manage and improve your heart health with an app on your smartphone. **This program is offered at no cost and includes a free blood pressure monitor.**

You may participate if you are a full-time staff member, spouse/domestic partner and dependent(s) over age 18 covered by an Amgen healthcare plan with blood pressure readings of 140/90 or above or are currently taking blood pressure medication. To enroll, go to **Hello Heart** or text AMGEN23 to **75706**.

- Use your personal Hello Heart monitor to track your cholesterol.
- Check your blood pressure and save your readings with the Hello Heart app. The app will provide clear explanations of what they mean.
- Send your readings and progress reports to your doctor (if you want to) to catch potential issues early.
- Access personalized tips for maintaining a healthy heart.
- Set medication reminders in the Hello Heart app so you never forget.

Your information is kept 100% private on your phone. Only you will know what your heart is up to. Access the app whenever you need it, anywhere, anytime.

Related Links

- [Vitality Health](#)
- [Hello Heart](#)
- [Hello Heart App \(iPhone\)](#)
- [Hello Heart App \(Android\)](#)

Wellness Discount

- If you reach 2,500 points and your spouse/domestic partner reaches 1,000 points, your Wellness discount will be \$20 per month (\$240/annual).
- If you reach 6,000 points and your spouse/domestic partner reaches 3,000 points, your Wellness discount will be \$40 per month (\$480/annual).

Legal Notices

Our plans are designed to be in compliance with the following federal government provisions. Select a provision for details.

Summary of Benefits and Coverage

[2024 Anthem Traditional PPO Less than \\$100,000](#)

[2024 Anthem Traditional PPO \\$100,000-\\$199,999](#)

[2024 Anthem Traditional PPO \\$200,000+](#)

[2024 Anthem Value PPO Less than \\$100,000](#)

[2024 Anthem Value PPO \\$100,000-\\$199,999](#)

[2024 Anthem Value PPO \\$200,000+](#)

Regional Plans

[2024 Anthem EPO](#)

[2024 HMSA PPO](#)

[2024 Kaiser HMO](#)

[2024 UHC HMO](#)

Price Transparency

The [Transparency in Coverage Final Rules](#) require certain group health plans to disclose on a public website information regarding in-network provider rates and historical out-of-network allowed amounts and billed charges for covered items and services in two separate machine-readable files (MRFs).

The MRFs for the benefit package options under the Amgen Health Plan are [Anthem MRFs](#). Use this link and enter the Amgen EIN (95-3540776) when asked to *Find Files for an Organization*.

Contacts

Use the information below if you have questions.

Benefit/Program	Contact Information
Annual Enrollment/General Questions	800-97-AMGEN (800-972-6436) Monday through Friday, 5:30 a.m. to 5:30 p.m. Pacific Time, excluding holidays. Visit <i>MyAmgen</i> > <i>MyHR</i> > <i>Benefits</i> > <i>Annual Enrollment</i> or go direct to benefits.amgen.com
Anthem Traditional PPO Anthem Value PPO	anthem.com/ca 844-647-3687
LiveHealth Online	livehealthonline.com 888-548-3432
UnitedHealthcare (UHC) HMO California	uhcwest.com 800-624-8822
Anthem EPO	anthem.com 844-647-3687
Kaiser HMO Northern California	kp.org 800-464-4000
Express Scripts Prescription Drug	express-scripts.com 800-817-8043
Delta Dental Plan	deltadentalins.com 800-765-6003
VSP Vision Plan	vsp.com 800-877-7195
Retiree Medical Savings Account (RMSA)	800-97-AMGEN (800-972-6436) Monday through Friday, 5:30 a.m. to 5:30 p.m. Pacific Time, excluding holidays.
Bright Horizons Family Solutions & Supports	clients.brighthorizons.com/amgen 877-242-2737 Visit <i>MyHR</i> > <i>Benefits</i> > <i>Work/Life Resources</i> or go direct to benefits.amgen.com

Contacts (Cont.)

Benefit/Program	Contact Information
Adoption Assistance Program	800-97-AMGEN (800-972-6436) Monday through Friday, 5:30 a.m. to 5:30 p.m. Pacific Time, excluding holidays. Visit <i>MyAmgen > MyHR > Benefits > Work/Life Resources</i> or go direct to benefits.amgen.com
Lyra Health	amgen.lyrahealth.com Email: care@lyrahealth.com 844-252-8511
Hello Heart	Email: support@helloheart.com 800-767-3471
Nutrition Services	Email: nutrition@amgen.com
Cancer Support Resources Wellness at Amgen	powerofvitality.com/vitality/login Email: wellness@amgen.com 800-97-AMGEN; option 5, option 2
MetLife Legal Plans	metlife.com/amgen info.legalplans.com (access code: 1500254) 800-821-6400 Monday through Friday, 8 a.m. to 8 p.m. Eastern Time
MetLife Pet Insurance	metlife.com/amgen 866-937-7387
Health Savings Account (HSA) Flexible Spending Accounts (HCFSA and DCFSA) Short- and Long-Term Disability Life Insurance and Accidental Death & Dismemberment (AD&D) Insurance	800-97-AMGEN (800-972-6436) Monday through Friday, 5:30 a.m. to 5:30 p.m. Pacific Time, excluding holidays. Visit <i>MyAmgen > MyHR > Benefits > Manage Health & Insurance Benefits</i> or go direct to benefits.amgen.com

This guide is meant to constitute Summaries of Material Modifications to the applicable Amgen benefit plan to which the changes apply. It constitutes an addendum to the Summary Plan Descriptions ("SPD") for the applicable Amgen plans, which are available at the Amgen Benefits Center or by request by calling 800-97-AMGEN.

Coverage under each Amgen plan is determined under the terms of the applicable plan, as reflected in the SPD, this guide, and any other notice regarding coverage changes issued since the effective date of the applicable SPD. Nothing in this guide creates a right to be covered under any particular plan. Receipt of these materials does not guarantee that the recipient is a participant under any particular plan and/or otherwise eligible for benefits under any plan.

This guide is intended to provide an overview of certain benefit plans and programs offered to certain Amgen U.S.-based staff members. It does not constitute an offer of employment or compensation. Should any discrepancy exist between the plan or program documents governing an Amgen benefit and the information stated in this guide, the official plan or program documents, which are maintained by Human Resources, will prevail. You are encouraged to obtain copies of this information and review it in detail. Amgen reserves the right to change or terminate the programs and benefits described at any time without notice.